Docket	No.:	

## APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INK-JET RECORDING HEAD AND INK-JET RECORDING APPARATUS

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	if applicable)				
I hereb	y state that I have	reviewed and unders	stand the contents of the above	e-identified application	on, including th
claims, as amende	d by any amendm	ent referred to above.	ice all information known to		
defined in Title 37	. Code of Federal	Regulations, § 1.56.	ice an information known to	me to be material to	patentability a
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provisional applica	ation(s) filed with	in one year prior to this	s application are hereby claime	gi: application(s) and	OI OILLES STATE
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the United States	of America eithe	n(s) for patent or inve	ntor's certificate on this inven- year prior to this application,	tion were filed in cor	intries foreign t
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<sup>\*\*</sup>Note to Inventor: Please sign name exactly as it appears above and insert the actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN " $\times$ " HERE igtimes

## PAGE 2 OF U.S.A. DECLARATION FORM

of Second Joint invent	or:	Satoshi			MOHRI
		Given Name	Middle	Initial	Family Name
**Inventor's Signature	<b>e:</b>	Shrosh	i		mobil
**Date of Signature:		8		26	/ 2003
		Month		Day	Year
Residence:	Ebina-shi		Kanagawa		Japan
<u></u>	City	Y	State of Provi	ince	Country
Citizenship:		Japan			
Post Office Address:		c/o Fuji Xerox Co.		, Hongo,	
(Imart Complete mailing address, including country)		Ebina-shi, Kanaga	wa, Japan		
Tomas Susa Visit St.			•		
Typewritten Full Name of Third Joint inventor	<b>e</b> 	Naoki		•	MORITA
	.•	Given Name	Middle	Initial	Family Name
**Inventor's Signature	e:	Mush i	- Wildele	TIMPIGE	11.00
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Residence:	Ebina-shi		Kanagawa	,	Japan
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**Inventor's Signature	•	Given Name	Middle	initial	Family Name
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This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.

<sup>\*\*</sup>Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.